

A. County: _____ Contract Number: _____

Grant Dates: From / / To / / Modification Number: _____

B. Line Items	Current Allocation				Proposed Changes (+/-)				Revised Allocation
	<i>State Funds</i>	<i>Hard Match</i>	<i>In Kind Match</i>	<i>Any Other Match</i>	<i>State Funds</i>	<i>Hard Match</i>	<i>In Kind Match</i>	<i>Any Other Match</i>	
Salaries and Benefits									
Services and Supplies									
Professional Services									
CBO Contracts									
Administrative Overhead									
Fixed Assets									
Other									
Grand Total									

Justification for Budget Modification (attach additional pages if necessary)

C. Design or Scope of Project Modifications and Justification (attach additional pages if necessary)

D. Program Evaluation Modification and Justification (attach additional pages if necessary)

Person Preparing Report	Project Financial Officer	Project Manager
_____ Signature	_____ Signature	_____ Signature
_____ Name	_____ Name	_____ Name
_____ Title	_____ Title	_____ Title
_____ Address	_____ Date	_____ Date
_____ Telephone	_____ Telephone	_____ Telephone
_____ Date	For Board of Corrections use only	
_____ Telephone	Approved: _____	Date: _____
	Board of Corrections Representative	

Instructions

Fill this form out completely, showing the currently approved budgeted amounts for each Budget Category Line Item; the dollar amount being added to or deducted from each category; and the new totals. If there is no change in a particular category show a "0". Please explain the reason(s) for the budget modification.

If a design or scope of project modification, or if program evaluation component modifications are being requested please provide an explanation of the requested modification and the justification for the request.

This form shall be signed by the person preparing the modification request, the Project Financial Officer, and the Project Manager. **The form should be submitted in quadruplicate to the Board of Corrections** for approval pursuant to the instructions contained in the *Mentally Ill Offender Crime Reduction Grant, Contract Administration Policies and Procedures Manual for Counties* Section V. Contractual Requirements, subsection B. Budget/Program Modifications (Page 5).